

The Croft (RCH) Limited

# The Croft (RCH) Limited

## Inspection report

Hooke Hill  
Freshwater  
Isle of Wight  
PO40 9BG

Tel: 01983752422

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## Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Inspected but not rated
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# Summary of findings

## Overall summary

### About the service

The Croft (RCH) Limited is a residential care home that provides accommodation and care for older people and younger adults living with a mental health condition. The service is registered to accommodate up to 21 people. At the time of our inspection, there were 16 people living at the service.

### People's experience of using this service and what we found

Although the service had a good supply of PPE to meet current and future demand, not all staff were wearing the correct type of face masks. Some staff were noted to be wearing fabric face coverings, not fluid resistant masks as required by best practice guidance. Immediate action was taken when we identified this to the management team.

Following the inspection, the provider updated their COVID – 19 policy. We received a copy of this which now reflected current best practice guidance. An infection control audit had not been completed since the previous inspection in November 2020. This meant the provider could not be assured that infection prevention and control measures were being followed by staff and procedures would protect people and others.

Staff had received training in the correct use and disposal of PPE. Staff had also received training in infection control practices.

There were procedures in place to support safe visiting by family members or professionals. Staff undertook temperature checks and asked questions to determine risks posed by visitors. Rapid response lateral flow tests (LFT) were undertaken for visitors before they entered the home. Visitors were provided with Personal Protective Equipment (PPE) and guided to its safe use.

New admissions or people returning from hospital were supported in line with best practice guidance. They were expected to provide recent COVID-19 test results, were further tested by the service following admission and isolated upon arrival for 14 days to minimise the risk of potential infection to existing people. These procedures were also followed if the service became aware that people had not followed safe practices when out of the home in the local community.

People and staff were regularly tested for COVID-19. Staff had LFT testing twice a week as well as standard Polymerase Chain Reaction (PCR) tests weekly. The manager understood the actions they needed to take should any tests return a positive result.

The home was kept clean. A program of frequent cleaning of high touch surfaces, such as light switches, handrails and door handles was in place.

The provider and manager understood good recruitment procedures and the requirement for pre-

employment checks to be undertaken.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection (and update)

The previous comprehensive inspection resulting in a rating for this service, was Requires Improvement (published 24 August 2019). There were two breaches of regulation.

In November 2020 we undertook a targeted inspection of this service. We looked at the parts of the key question 'Is the service safe' we had specific concerns about. This identified areas for improvement. We issued the provider with a warning notice and told them they must make improvements.

At this targeted inspection we followed up the warning notice and looked at recruitment and infection prevention and control procedures. Some improvements had been made however, the service remains rated requires improvement and we did not assess all areas necessary to change the ratings for this service.

#### Why we inspected

We undertook this targeted inspection to check whether the Warning Notice we previously served in relation to Regulations 12 (infection prevention and control) and 19 (recruitment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. The overall rating for the service has not changed following this targeted inspection and remains Requires Improvement.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Croft (RCH) Limited on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Enforcement

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection. We will continue to discharge our regulatory enforcement functions required to keep people safe and to hold providers to account where it is necessary for us to do so.

We have identified a breach in relation to Infection prevention and control at this inspection. We have found evidence that the provider needs to make improvements. Please see the safe section of this full report.

You can see what action we have asked the provider to take at the end of this full report.

#### Follow up

We will meet with the provider following this report being published to discuss how they will make changes to ensure people and others are safe. standards of quality and safety. We will work alongside the provider and local authority to monitor progress. We will return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

# The five questions we ask about services and what we found

We always ask the following five questions of services.

## Is the service safe?

Details are in our safe findings below.

At our last inspection we rated this key question Requires Improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

# The Croft (RCH) Limited

## Detailed findings

### Background to this inspection

#### The inspection

This was a targeted inspection to check whether the provider had met the requirements of the Warning Notice in relation to Regulations 12 (Safe care and treatment) and 19 (Fit and Proper persons employed) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

#### Inspection team

The inspection was completed by one inspector.

#### Service and service type

The Croft (RCH) Limited is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service did not have a manager registered with the Care Quality Commission. This means that the provider is legally responsible for how the service is run and for the quality and safety of the care provided. An acting manager had been appointed.

#### Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because we needed to be sure that the provider would be available to support the inspection.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service.

The provider was not asked to complete a provider information return prior to this inspection. This is

information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

#### During the inspection

We reviewed recruitment records and spoke with the acting manager, the nominated individual and a member of the provider team. We viewed communal areas of the home and observed staff supporting people in communal areas of the home. We also spoke with a member of the housekeeping staff and a further care staff member. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at infection control policies and procedures and records relating to infection control. We spoke with the manager to clarify some of the information we had received.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as Requires Improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served in relation to Regulation 12 (safe care and treatment) infection prevention and control and Regulation 19 (Fit and proper persons employed) recruitment procedures. We will assess all of the key question at the next comprehensive inspection of the service.

### Preventing and controlling infection

We issued a warning notice in December 2020 telling the provider they must make improvements in respect of infection prevention and control.

- We were not initially assured that the provider's infection prevention and control policy was up to date. Following the inspection the provider updated their COVID – 19 policy. We received a copy of this which now reflected current best practice guidance. An infection prevention and control audit had not been completed since the previous inspection in November 2020. This means the provider has not reviewed how well the service is following procedures to prevent and control infections.
- We were not initially assured that the provider was using PPE effectively and safely. Although the service had a good supply of PPE to meet current and future demand not all staff were wearing the correct type of face masks. Some staff were noted to be wearing fabric face coverings not fluid resistant masks as required by best practice guidance. Immediate action was taken when we identified this to the management team.
- We were somewhat assured that the provider was preventing visitors from catching and spreading infections. Risk assessments for visitors had not been completed. The manager undertook to complete these and submitted these following the inspection. Visitors would enter and leave the home via the porch and front door where COVID 19 LFT tests would also be undertaken. Although hand sanitiser and supplies of PPE were available for visitors there was no bin provided for the safe disposal of PPE when leaving the home.
- Following the actions taken above we were somewhat assured that the provider was making sure infection outbreaks can be effectively prevented or managed. Although action was subsequently taken by the service, we were not assured that this would have occurred had we not undertaken this inspection. We could not be assured that in future, action would be taken should additional measures be required.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service including people returning following a hospital stay. When people accessed the local community independently, they were provided with suitable PPE and reminded about hand hygiene on their return. When staff became aware people may not have followed safe practices when out of the home additional measures such as self-isolation were encouraged.
- We were assured that the provider was accessing testing for people using the service and staff.



- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.

We have signposted the provider to resources to develop their approach.

We found no evidence that people had been harmed however, systems were either not in place or robust enough to demonstrate safety was effectively managed. This placed people at risk of harm. This was a repeated breach of regulation 12 (safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

#### Staffing and recruitment

At the previous inspections in July 2019 and November 2020 we found that all necessary pre-employment checks had not been completed prior to staff commencing employment at the home. This was a breach of regulation 19 (Fit and proper persons employed) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 19.

- Since the previous inspection in November 2020 no new staff have been employed at The Croft.
- We looked at the recruitment records for the one staff member still employed at the home whose records we had previously identified as having missing pre-employment checks. There was evidence action had been taken to ensure all necessary checks had now been completed so the provider could be sure the person was suitable to work with vulnerable adults.
- We discussed the home's recruitment procedures with the provider and manager. The discussion showed they understood the need for good recruitment procedures to be followed and the requirement for pre-employment checks to be undertaken.

This section is primarily information for the provider

## Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	<p>Regulation 12 HSCA RA Regulations 2014 Safe care and treatment</p> <p>People who use services and others were not always protected against the risks associated with preventing, detecting and controlling the spread of infection.</p> <p>Regulation 12 (2) (h)</p>